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CONFIRMATION NO. 8633

SERIAL NUMBER 10/795,970	FILING OR 371(c) DATE 03/08/2004 RULE	CLASS 604	GROUP ART UNIT 3767	ATTORNEY DOCKET NO. 99823-00002
APPLICANTS Michael Conte, Milltown, NJ; <i>One PS</i>				
** CONTINUING DATA ***** This appln claims benefit of 60/452,981 03/07/2003 <i>yes PS</i>				
** FOREIGN APPLICATIONS ***** <i>No PS</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/26/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>Philippe</i> Initials <i>PS</i>		STATE OR COUNTRY NJ	SHEETS DRAWING 8	TOTAL CLAIMS 17
INDEPENDENT CLAIMS 2				
ADDRESS 27614				
TITLE Safety syringe with cap holding device				
FILING FEE RECEIVED 575	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	